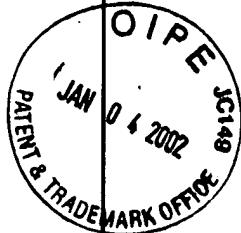


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BAKER BOTTS LLP



NOTICE OF APPEAL FROM THE EXAMINER TO THE
BOARD OF PATENT APPEALS AND INTERFERENCES

Docket Number (Optional)

A32130

In re Application of
Iacono

Application Number
09/244,792

Filed
02/05/99

For USE OF AEROSOLIZED * see attached

Group Art Unit
1614

Examiner
Travers

Applicant hereby appeals to the Board of Patent Appeals and Interferences from the decision of the examiner dated, June 28, 2001, rejecting the following claims: 19-48

The fee for this Notice of Appeal is (37 CFR 1.17(b)) \$ 320

Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: \$ 160

A check in the amount of the fee is enclosed.

Payment by credit card. Form PTO-2038 is attached.

The Commissioner has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.

The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. 02-4377. I have enclosed a duplicate copy of this sheet.

A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.

03/04/2002 MPEOPLES 00000001 024377 09244792

01 FC:219 ^{160.00 CH} WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

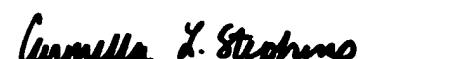
I am the

applicant/inventor.

assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed.
(Form PTO/SB/96)

attorney or agent of record. PTO Reg No.41,328

attorney or agent acting under 37 CFR 1.34(a).
Registration number if acting under 37 CFR 1.34(a). _____


Signature

Carmella L. Stephens

Typed or printed name

December 28, 2001

Date

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

*Total of _____ forms are submitted.

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